| Date | | Boys Town National Research Hospital EIPA Diagnostic Center c/o Christine Grassmeyer Continuing Education Specialist Center for Childhood Deafness & 425 N 30th St Omaha NE 68131 Telephone: (402) 452-5039 Fax: (402) 452-5028 |
|-----------------------------------|--|---|
| Dear Ms. Gras | smeyer, | |
| (EIPA) and red licensure requi | onal Interpreter, I have taken the Educational Interpreter as score of 3.5 or higher which is the standard rements under the Iowa Department of Public Hoe sent to the following: | lard for Iowa. As part of the Iowa |
| | Iowa Board of Sign Language Interpreters and IDPH, Professional Licensure Lucas State Office Bldg 5 th Floor 321 E 12 th St Des Moines IA 50319-0075 515-281-4287 or e-mail: karla.hoover.@idph.io | |
| Name: | | |
| Maiden Name | : | |
| EIPA Date of | Evaluation: | |
| Location of Ev | valuation: | |
| Home Address | s: | |
| Phone: | | |
| Email: | | |
| Signature: | | Date: |
| Witness Signa | ture: | Date: |

Building Principal Personnel File

cc: